MDPB Minutes June 18, 2003

Members present:, J. Burton, D. Ettinger, S. Diaz, K. Kendall, B. Callamore, D. Stuchiner, Eliot Smith

MEMS Staff: D. White

Regional Coordinators: J. LeBrun, Rick Petrie, B. Dunwoody

Guests: T. Judge, P. Marcolini, J. Regis, J. Alexander

Item	Discussion	Action	Follow-up
Previous minutes: 05/03	none	Adopted	None.
Old Business 1. Legislative Update	White: legislature has adopted Dirigo Health plan. General discussion ensued on this element.	None	None
Maine EMS protocol for cyanide overdose and treatment.	Group discussed protocol developed by Dr. Burton and the Maine EMS staff. This is in response to a request for formal protocol development for cyanide overdose and exposures in the industrial setting. Dr. Burton reviewed the protocol – this is intended for services covering industrial sites where this exposure is a risk. 2 elements of discussion addressed need to involve medical control vs standing order, and 2 – risks/side effects to treatment.	The group agreed that communication with Dr. Tomassoni, the medical director of the Northern NE Poison Center, should be undertaken to review the protocol and issue of risks of treatment and thoughts on the standing order question. Motion Smith (second Kendall) to accept the protocol with the provisio that Dr. Tomassoni review and his comments be incorporated. Vote 8-0 in favor of the proposal.	Dr. Burton will contact Dr. Tomassoni and following this communication update the protocol and finalize for Maine EMS.
New Business 1. PIFT proposal: H2 Blockers, PPI's, Octreotide	Group discussed protocol developed by Dr. Diaz for the PIFT list of medications. The group felt that the drugs represented minimal risk to patients and, although not necessarily essential drugs for continued infusion during transport, were commonly encountered.	Motion Kendall (second Smith) to accept the protocol. Vote 8-0 in favor of the proposal. Maine EMS staff will review for appropriateness for review by ops or education.	None.
2. Naloxone/Overdose	Some discussion addressing the acuity of		Dr. Burton will attempt to

3. Medical Director Recruitment	the target population for octreotide. Dr. Burton reviewed the latest developments regarding narcotic overdose deaths and morbidity in Maine as well as naloxone usage. It is the perception of many in the health care setting and law enforcement that the activity has decreased by approximately 50% for 2003 compared to 2002, according to Dr. Burton. It is unclear how many intermediates have administered naloxone since the approval for intermediates in 2002. Diffferent approaches toward answering this question were discussed. Dr. Burton discussed his expectation that he will end his term as Maine EMS Medical Director as of January 1, 2004. MDPB members discussed the medical director position and the recruitment process. Some discussion regarding the integration of the timeline with the Maine EMS system study that is anticipated from the Muskie School and Maine legislature.	None.	query the EMS database for the naloxone encounters since intermediate approval – this will require a link to identify the providers license level in the Maine EMS encounters where naloxone was administered. Item for September agenda. Maine EMS staff will begin the announcement and recruitment process in the next few months.
4. Autovents	Dr. Diaz updated MDPB on availability of autovents for disaster planning.	None.	None.
Next meeting 9/17/2003 (0930 – 1230)	No meeting in July or August.		